

1. Overview of Product Stewardship Approach

Reference Material: Schematic Overview of Product Stewardship Approach to County-wide Pharmaceutical Take-back Program

- Producer Roles
- Other Stakeholder Roles
- County Agency Roles
- Decision-points about how much to specify in regulation

2. Review of Key Policy Components & Options

Reference Material: Pharmaceutical Product Stewardship Policy Comparison (labeled Appendix 7. July 16, 2012)

A. Medicines accepted for return (*#1 in Policy Table*): addressing controlled substances while allowing for pending change in DEA regulations.

- WA State bill option – require collection of all medicines, including controlleds, through any collectors allowed under federal and state laws/regulations.
- Alameda ordinance option – exempt controlleds, except for specific assistance that must be provided to voluntary law enforcement programs.
- Middle ground – require collection of all medicines, including controlleds, but define support to be provided to voluntary law enforcement programs. And specify that controlleds may be collected by others in future as allowed under federal and state laws/regulations.

B. How do drug producers work together? (*#6B in Policy Table*)

- WA State bill option – define single non-profit entity for producers.
- Alameda ordinance option – allow producers to work together or independently in any combination.
- WA E-waste law option – define “standard plan” that all producers must participate in, unless they “opt out” to form an independent plan.

C. Defining the collection system (*#4A in Policy Table*): how much detail to specify?

- Number and type of collection sites/methods: define # of collection sites? allow any pharmacy that wants to participate to be a collector?
- Specify that pharmacy take-back programs operate under approved WA Board of Pharmacy protocols to provide consistency for pharmacies operating across the state?

D. Defining costs that producers are responsible for (*#3 in Policy Table*)

- In-kind staff time at voluntary collection sites.
- Set a cost cap?
  - Define cap as \$ limit, per WA state bill?
  - Define cap as amount per unit medicines sold, eg 2 pennies per unit?

E. Education and program promotion requirements (*#5 in Policy Table*)

- Promoting safe storage of medicines in the home and disposal of medicines through take-back program – shared roles in education for producers and local governments.
- Voluntary education requirements for other stakeholders, eg pharmacies.

F. Other discussion about items in the Policy Comparison Chart?

3. Next Steps?